1   I claim:

2   1.   A method of diagnosing a probability of pain relief through medical treatment in a patient, the

3   method comprising the following steps:

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5   (a)   administering a perceptual test to the patient, the perceptional test including a plurality

6   of declarative statements relating to somatization;

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8   (b)   receiving responses from the patient to the plurality of declarative statements, said

9   responses including an affirmative response and a negative response;

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11   (c)   providing at least three scoring templates of pre-selected responses to the plurality of

12   declarative statements, the at least three scoring templates of pre-selected responses

13   being selected from a group of validity factors comprising defensiveness,

14   predictiveness and carelessness;

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16   (d)   providing at least six scoring templates of pre-selected responses to the plurality of

17   declarative statements, the at least six scoring templates of pre-selected responses

18   being selected from a group of clinical factors comprising somatic concern, depressed

19   mode, passive personality, compulsive/obsessive personality, hypomania, and ego

20   integrative defect;

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22   (e)   applying each of said scoring templates from the group of validity factors and the

23   group of clinical factors to the responses to the plurality of declarative statements from

24   the patient, producing a raw score value for each of the validity factors and each of the

25   clinical factors;

1   (f)   assessing errors in the test utilizing a carelessness factor raw score;

3   (g)   adjusting each raw score from the group of clinical factors comprising somatic
4   concern, compulsive/obsessive personality, and hypomania, by a percentage of the
5   defensiveness factor raw score;

7   (h)   creating a set of final scores relating to the somatic concern clinical factor, the
8   compulsive/obsessive personality clinical factor, and hypomania clinical factor;

10   (i)   preserving the set of raw scores from a group of clinical factors comprising depressed
11   mode, passive personality, and ego integrative defect;

13   (j)   standardizing the score for each of the somatic concern clinical factor final score, the
14   depressed mode clinical factor raw score, the passive personality clinical factor raw
15   score, the compulsive/obsessive personality clinical factor final score, and the
16   hypomania clinical factor final score, utilizing a standardizing analysis of a clinically
17   assessed normative group;

19   (k)   applying a set of scoring rules to a group of clinical factor standardized scores
20   comprising somatic concern, depressed mode, and passive personality, determining
21   a scoring value of standard deviations above the normative group mean for each said
22   standardized score clinical factor;

24   (l)   applying the set of scoring rules to the ego integrative defect clinical factor raw score,
25   determining a scoring value of standard deviations above the normative group mean
            for the ego integrative defect clinical factor;

1   (m)   applying the set of scoring rules to a numerical relationship between the scoring value

2   for the somatic concern clinical factor and the scoring value for the

3   compulsive/obsessive personality clinical factor, determining a scoring value of

4   standard deviations above the normative group mean for said numerical relationship;

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6   (n)   applying the set of scoring rules to a numerical relationship between the scoring value

7   for the somatic concern clinical factor and the scoring value for the passive personality

8   clinical factor, determining a scoring value of standard deviations above the normative

9   group mean for said numerical relationship;

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11   (o)   applying the set of scoring rules to a numerical relationship between the scoring value

12   for the depressed mode clinical factor and the scoring value for the hypomania clinical

13   factor, determining a scoring value of standard deviations above the normative group

14   mean for said numerical relationship;

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16   (p)   summing the scoring value for the somatic concern clinical factor, the scoring value

17   for the depressed mode clinical factor, the scoring value for the passive personality

18   clinical factor, the scoring value for the ego integrative defect clinical factor, the

19   scoring value for the numerical relationship between the somatic concern clinical

20   factor and the compulsive/obsessive personality clinical factor, the scoring value for

21   the numerical relationship between the somatic concern clinical factor and the passive

22   personality clinical factor, and the scoring value for the numerical relationship

23   between of the depressed mode clinical factor and the hypomania clinical factor; and

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25   (q)   thereby producing a single pain index score indicating and measuring the effect of

           somatization on the patient.

1   2.   A method as in claim 1 and further including the steps of:

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3   (a)   establishing a probability equation score for the probability of pain relief through

4   medical treatment by comparing the predictiveness factor raw score to a regression

5   analysis of predictiveness validity factor raw scores to predicted percentages of

6   probability of success to medical treatment;

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8   (b)   plotting the probability equation score and the pain index score to a graph of divergent

9   linear curves of clinically observed percentage probability values and numerical

10   indices scores for multiple patients; and

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12   (c)   thereby comparing a relationship between the probability equation score and the pain

13   index score, confirming accuracy and internal validity of the method diagnosing a

14   probability of pain relief through medical treatment in a patient.

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